

## **Table of Contents**

IAB CASE NO. SH2313309

### **OFFICER INVOLVED SHOOTING FORM AND INVESTIGATIVE SUMMARY**

#### **INTERVIEWS**

Deputy Joseph Baclawski  
Deputy Mike Wilber  
Deputy Dana Vilander  
Deputy [REDACTED]  
Deputy Ervin Francois  
Deputy Garrick Twedt  
Deputy [REDACTED]  
Deputy Juan Rodriguez  
Deputy Dan Ferrell  
Deputy Kevin Brown  
Deputy Carlos Lopez  
Deputy Leo Foisner  
Deputy John Montenegro  
Sergeant Anthony Baudino  
Deputy Ian Stade  
Deputy Christopher Smelser  
Deputy [REDACTED]

Suspect Aaron Collins  
Suspect Carlos Mercado

#### **EXHIBITS**

- A- Homicide Book
- B- Search Warrant Preparation Check List
- C- SEB After Action Report
- D- Firearms examination reports
- E- Compact disc containing the crime scene photos
- F- Crime scene sketches and legends

## **MISCELLANEOUS DOCUMENTS**

- Signed Witness Admonitions
- Criminal History Reports for Suspect Collins

# Los Angeles County Sheriff's Department

## Officer Involved Shooting

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Report Date: <b>May 29, 2012</b>		Bureau/Station/Facility: <b>Special Enforcement Bureau</b>		Admin. Invest? <input type="checkbox"/> Hit? <input type="checkbox"/>	
<b>Incident Information</b>					
URN: <b>012-00049-3199-055</b>		Date: <b>May 25, 2012</b>		Time: <b>0450 hours</b>	
City or Station: <b>Wilmington</b>		Nature of Incident: <b>Special Enforcement Bureau deputies were struck by bullet fragments when the suspects shot at them while they were serving a search warrant.</b>			
Location: <b>████████ Ronan Avenue</b>					
Location Type (circle one or more): Backyard Beach Business Freeway Industrial Park Parking Lot <u>Residence</u> Rural School Street Other: _____		Lighting (circle only one): <u>Darkness</u> Daylight Other Street Lights  Weather (circle only one): <u>Clear</u> <u>Cloudy</u> Fog Rain  Distance: _____		Incident Type (circle one or more): Accidental <u>Armed Person</u> Fleeing Suspect Foot Pursuit Gun Take Away Moving Vehicle Sniper/Ambush Startle Struggle Involved Traffic Stop Unarmed Person Unintentional Vehicle Pursuit <u>Warrant Service</u> Warning Shot Other: _____	
Total # of Shots Fired by Deputy <b>9</b>		Total # of Shots Fired by Suspect		Initiated by (circle only one): Arrest Warrant Call Observation One Person Unit <u>Other</u> <u>Search Warrant</u> Two Person Unit  Prior Activity (circle only one): <u>Detective</u> Inmate Transport Other Routine Patrol  Aero Unit? <input type="checkbox"/> Canine Unit? <input type="checkbox"/>	
<b>Employee Witnesses</b>					
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	<b>Baclawski</b>	<b>Joseph</b>		EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	<b>Wilber</b>	<b>Michael</b>	<b>R.</b>	EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	<b>Vilander</b>	<b>Dana</b>	<b>R.</b>	EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
<b>Non-Employee Witnesses</b>					
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
<b>Supervisors</b>					
Employee #	Last Name	First Name	M.I.	(circle one or more):	
████████	<b>Baudino</b>	<b>Anthony</b>	<b>J.</b>	<u>On Duty</u> <u>Present during shooting</u> Witness to shooting <u>Involved in shooting</u>	
Employee #	Last Name	First Name	M.I.	(circle one or more):	
████████				<u>On Duty</u> <u>Present during shooting</u> Witness to shooting Involved in shooting	
<b>Watch Sergeant</b>					
Employee #	Last Name	First Name		M.I.	
████████					
<b>Watch Commander</b>					
Employee #	Last Name	First Name		M.I.	
████████	<b>Vera</b>	<b>Eliezer</b>			

<b>PSTD Use Only</b>	
SH #	<b>2313309</b>

Rollout Information			
Arrival Date	May 25, 2012	Arrival Time	0715
Date Submitted		Date of Recommendation	
Employee #	Last Name	First Name	M.I.
	Libertone	Patrick	M.I.
Employee #	Last Name	First Name	M.I.
	Allen	Victor	M.I.
Employee #	Last Name	First Name	M.I.
	Smeltzer	Chad	M.I.
Shooting / Force Information			

## Method

(AW)	Arwen	(OV)	Other Weapon: Vehicle
(BC)	Baton: (Control)	(OB)	Other Weapon: Blunt Object
(BI)	Baton: (Impact)	(OO)	Other Weapon: Other
(BF)	Bodily Fluids	(PK)	Personal Weapon: Feet/Leg: (Kick)
(CN)	Canine	(PS)	Personal Weapon: Feet/Leg: (Sweep)
(CR)	Carotid Restraint	(PH)	Personal Weapon: (Hand/Arm)
(CH)	Choke Hold	(PP)	Personal Weapon: (Push)
(CT)	Control Holds: (Control Techniques)	(PO)	Personal Weapon: (Other)
(TT)	Control Holds: (Team Takedown)	(RS)	Resistance
(TD)	Control Holds: (Takedown)	(CN)	Restraint Device: (Capture Net)
(CE)	Chemical	(RH)	Restraint Device: (Handcuffs)
(OC)	Chemical Agents (OC Spray)	(HB)	Restraint Device: Hobble (Legs Only)
(TG)	Chemical Agents (Tear Gas)	(TP)	Restraint Device: Hobble (TARP)
(EX)	Explosives	(RE)	Restraint Device: REACT Belt
(FH)	Firearm (Handgun)	(SP)	Sap
(FR)	Firearm (Rifle)	(SH)	Shield
(FS)	Firearm (Shotgun)	(SG)	37mm Stinger
(FO)	Firearm (Other)	(SB)	Sting Ball
(FB)	Flashbang	(ST)	Stun Bag
(FL)	Flashlight	(TR)	Taser
(OE)	Other Weapon: Edged	(UC)	Uncooperative

**Type of Injury**

(AB)	Abrasion
(BR)	Bruise
(BU)	Bum
(CP)	Complaint of Pain
(CO)	Concussion
(DH)	Death
(DI)	Dislocation
(DB)	Dog Bite
(FR)	Fractures
(GS)	Gunshot
(HB)	Human Bite
(LC)	Lacerations
(ND)	Nerve Damage
(OD)	Organ Damage
(PA)	Paralysis
(PW)	Puncture Wound
(SD)	Soft Tissue Damage
(ST)	Sprain/Twists
(UN)	Unconscious
(RM)	Refused Med Treatment
(NN)	NONE

**Body Part Injured**

(AD)	Abdomen
(AK)	Ankle
(AR)	Arm
(BK)	Back
(BT)	Buttocks
(CH)	Chest
(EL)	Elbow
(FA)	Face
(FE)	Feet
(FI)	Fingers
(GE)	Genitals
(GR)	Groin
(HD)	Hand
(HE)	Head
(HI)	Hip
(IN)	Internal
(KN)	Knees
(LE)	Leg
(NK)	Neck
(SH)	Shoulder
(WR)	Wrist

**Brand**

(AK)	AK-47	(IV)	Iver Johnson	(RI)	RGI
(BN)	Benelli	(JE)	Jennings	(RO)	Rossi
(BR)	Beretta	(LO)	Lorcin	(SW)	Smith & Wesson
(BW)	Browning	(LU)	Luger	(SR)	Sturm Ruger
(CH)	Charter Arms	(MA)	Marlin	(ST)	Sterling
(CO)	Colt	(MO)	Mossberg	(TA)	Taurus
(DA)	Davis Industries	(NC)	NCI aka SKS	(WE)	Weatherby
(GL)	Glock	(NA)	North American	(WN)	Winchester
(HA)	Harrington & Richardson	(NO)	Norinco	(US)	US Government
(HI)	Hi Standard	(RA)	Raven	(YY)	Handmade (Inmate)
(HK)	H & K	(RM)	Remington	(XX)	Homemade (Non-Inmate)
(IT)	Itica	(RG)	RG	(ZZ)	Other Brand

**Caliber**

(9) 9 mm	(24) .243 caliber	(41) .410 gauge
(10) 10 mm	(25) .25 caliber	(44) .44 caliber
(12) 12 gauge	(30) .308 caliber	(45) .45 caliber
(20) 20 gauge	(35) .367 caliber	(50) 50 mm
(21) .22-250	(36) 30-80 caliber	(SL) Slug
(22) .22 caliber	(38) .38 caliber	(WW) Other caliber
(23) .223 caliber	(40) .40 caliber	

**FORCE APPLIED** (one code per block)

[illegible]

# Officer Involved Shooting Involved Employee Information

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Involved Employee										
E 1	Employee # [REDACTED]		Last Name <b>Stade</b>			First Name <b>Ian</b>		M.I. <b>M.</b>		
	Sex: <b>M</b>	Race: <b>W</b>	Rank <b>Deputy</b>		Unit Assignment: <b>SEB</b>		Work Assignment (Unit #, Module, etc.): <b>Blue Team / Scout</b>			
	ShiftTime (circle only one): <b>(EM)</b> PM Day		ShiftType (circle only one): <b>(Regular)</b> Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used: _____			
	Hospital Admission? <input type="checkbox"/>		Hospital Name: _____		Coroner Case? <input type="checkbox"/>		Coroner Case # _____		Interviewed? <input checked="" type="checkbox"/>	
	Hrs of sleep prior to shooting: <b>5</b>		Duty Time (hrs): [REDACTED]		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest <b>Uniform w/ Vest</b> Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors: _____			
	Age: [REDACTED]		Height: <b>601</b>		Weight: <b>230</b>					
	Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]		Laser Training Date: [REDACTED]					
	Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]		Certification Unit: [REDACTED]		Prior Shootings? [REDACTED]		Number of Prior Shootings: [REDACTED]	
	Weapons Fired Brand: <b>H&amp;K</b>		Caliber <b>9mm</b>		# Shots <b>1</b>		Weapons Fired Brand: [REDACTED]		Caliber [REDACTED]	
	Field Training Officer Emp # [REDACTED]		Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]			
E 2	Employee # [REDACTED]		Last Name <b>Smelser</b>			First Name <b>Christopher</b>		M.I. <b>J.</b>		
	Sex: <b>M</b>	Race: <b>W</b>	Rank <b>Deputy</b>		Unit Assignment: <b>SEB</b>		Work Assignment (Unit #, Module, etc.): <b>Blue Team / Back-up Scout</b>			
	ShiftTime (circle only one): <b>(EM)</b> PM Day		ShiftType (circle only one): <b>(Regular)</b> Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used: _____			
	Hospital Admission? <input type="checkbox"/>		Hospital Name: _____		Coroner Case? <input type="checkbox"/>		Coroner Case # _____		Interviewed? <input checked="" type="checkbox"/>	
	Hrs of sleep prior to shooting: <b>8</b>		Duty Time (hrs): [REDACTED]		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest <b>Uniform w/ Vest</b> Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors: _____			
	Age: [REDACTED]		Height: <b>603</b>		Weight: <b>235</b>					
	Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]		Laser Training Date: [REDACTED]					
	Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]		Certification Unit: [REDACTED]		Prior Shootings? [REDACTED]		Number of Prior Shootings: <b>2</b>	
	Weapons Fired Brand: <b>H&amp;K</b>		Caliber <b>9mm</b>		# Shots <b>2</b>		Weapons Fired Brand: [REDACTED]		Caliber [REDACTED]	
	Field Training Officer Emp # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]			
E 3	Employee # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. <b>O.</b>		
	Sex: <b>M</b>	Race: <b>H</b>	Rank <b>Deputy</b>		Unit Assignment: [REDACTED]		Work Assignment (Unit #, Module, etc.): [REDACTED]			
	ShiftTime (circle only one): <b>(EM)</b> PM Day		ShiftType (circle only one): <b>(Regular)</b> Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used: _____			
	Hospital Admission? <input type="checkbox"/>		Hospital Name: _____		Coroner Case? <input type="checkbox"/>		Coroner Case # _____		Interviewed? <input checked="" type="checkbox"/>	
	Hrs of sleep prior to shooting: <b>3</b>		Duty Time (hrs): [REDACTED]		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest <b>Uniform w/ Vest</b> Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors: _____			
	Age: [REDACTED]		Height: <b>509</b>		Weight: <b>170</b>					
	Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]		Laser Training Date: <b>03/14/12</b>					
	Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]		Certification Unit: [REDACTED]		Prior Shootings? [REDACTED]		Number of Prior Shootings: [REDACTED]	
	Weapons Fired Brand: <b>H&amp;K</b>		Caliber <b>9mm</b>		# Shots <b>3</b>		Weapons Fired Brand: [REDACTED]		Caliber [REDACTED]	
	Field Training Officer Emp # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED]		Last Name [REDACTED]			First Name [REDACTED]		M.I. [REDACTED]			

# Officer Involved Shooting Involved Employee Information

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Involved Employee										
E 4	Employee #		Last Name			First Name		M.I.		
			Baudino			Anthony		J.		
	Sex: M W		Rank: Sergeant		Unit Assignment: SEB		Work Assignment (Unit #, Module, etc.): Blue Team / Team Leader			
	ShiftTime (circle only one): EM PM Day		ShiftType (circle only one): Regular Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input checked="" type="checkbox"/>	
	Hrs of sleep prior to shooting: 4-5		Duty Time (hrs):		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors:			
	Age: Height: 510 Weight: 175									
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:					
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings: 2	
	Weapons Fired Brand: H&K		Caliber: 9mm		# Shots: 3		Weapons Fired Brand:		Caliber: # Shots:	
Field Training Officer Emp #		Last Name		First Name		M.I.				
Field Training Officer Emp #		Last Name		First Name		M.I.				
E	Employee #		Last Name			First Name		M.I.		
	Sex: Race:		Rank		Unit Assignment:		Work Assignment (Unit #, Module, etc.):			
	ShiftTime (circle only one): EM PM Day		ShiftType (circle only one): Regular Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>	
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors:			
	Age: Height: Weight:									
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:					
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings:	
	Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber # Shots	
Field Training Officer Emp #		Last Name		First Name		M.I.				
Field Training Officer Emp #		Last Name		First Name		M.I.				
E	Employee #		Last Name			First Name		M.I.		
	Sex: Race:		Rank		Unit Assignment:		Work Assignment (Unit #, Module, etc.):			
	ShiftTime (circle only one): EM PM Day		ShiftType (circle only one): Regular Overtime Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:			
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>	
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one): Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest		Other Factors:			
	Age: Height: Weight:									
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:					
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings:	
	Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber # Shots	
Field Training Officer Emp #		Last Name		First Name		M.I.				
Field Training Officer Emp #		Last Name		First Name		M.I.				



# Officer Involved Shooting Suspect Information

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## Suspect Information

S 1	Last Name <b>Collins</b>		First Name <b>Aaron</b>		M.I. <b>P.</b>
AKA Last Name		First Name		M.I.	
Sex: <b>M</b>	Race: <b>B</b>	Street Address: [REDACTED]		City: [REDACTED]	State & Zip Code: [REDACTED]
Work Phone: [REDACTED]	Home Phone: [REDACTED]	Social Security #: [REDACTED]		Driver's License #: [REDACTED]	
Age: <b>28</b>	D.O.B. <b>02-18-1984</b>	Height: <b>601</b>	Weight: <b>163</b>	FBI #: [REDACTED]	CII #: [REDACTED]
Booking # <b>3169566</b>	Primary Charge: <b>664/187(a) PC</b>		Secondary Charge:		
Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:	
Armed? <input checked="" type="checkbox"/>	Apprehended? <input checked="" type="checkbox"/>	Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

S 2	Last Name <b>Mercado</b>		First Name <b>Carlos</b>		M.I.
AKA Last Name		First Name		M.I.	
<b>Mercado Jr.</b>		<b>Carlos</b>			
Sex: <b>M</b>	Race: <b>H</b>	Street Address: [REDACTED]		City: [REDACTED]	State & Zip Code: [REDACTED]
Work Phone: [REDACTED]	Home Phone: [REDACTED]	Social Security #: [REDACTED]		Driver's License #: [REDACTED]	
Age: <b>27</b>	D.O.B. <b>12-17-1984</b>	Height: <b>508</b>	Weight: <b>245</b>	FBI #: [REDACTED]	CII #: [REDACTED]
Booking # <b>3169570</b>	Primary Charge: <b>11351 H&amp;S</b>		Secondary Charge: <b>11370.1(a) H&amp;S</b>		
Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:	
Armed? <input checked="" type="checkbox"/>	Apprehended? <input checked="" type="checkbox"/>	Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

S	Last Name		First Name		M.I.
AKA Last Name		First Name		M.I.	
Sex:	Race:	Street Address:		City	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:		Driver's License #:	
Age:	D.O.B.	Height:	Weight:	FBI #	CII #
Booking #	Primary Charge:		Secondary Charge:		
Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:	
Armed? <input type="checkbox"/>	Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

S	Last Name		First Name		M.I.
AKA Last Name		First Name		M.I.	
Sex:	Race:	Street Address:		City	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:		Driver's License #:	
Age:	D.O.B.	Height:	Weight:	FBI #	CII #
Booking #	Primary Charge:		Secondary Charge:		
Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:	
Armed? <input type="checkbox"/>	Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

# SUPPLEMENTAL EMPLOYEE WITNESSES

## Los Angeles County Sheriff's Department

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Employee Witnesses			
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	